

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Parkash S. GILL

Serial No: 09/743,684

Filed: April 23, 2001

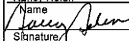
For: NOVEL INHIBITORS OF ANGIOGENESIS AND
TUMOR GROWTH

Art Unit: 1643

Examiner: Anne L. Holleran

I hereby certify that this correspondence
is being transmitted via electronic filing to:Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450 on
August 6, 2007

Date of Deposit

Nancy Nolan
NameSignature:  08/06/07
Date

Mail Stop Amendment

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is an amendment in the above-identified application.

- ☒ Small entity status has been claimed. See 37 CFR § 1.27.
- ☒ A Petition for One-month Extension of Time is enclosed.
- ☒ No additional fee is required.

The fee has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NUMBER PREVIOUSLY PAID FOR		(Col. 3) PRESENT EXTRA*	LG/SM \$ ENTITY FEE	ADD'L FEE DUE
TOTAL CLAIMS FEE	26	-	34	**	0	LG=\$50 SM=\$25	\$ 0
INDEPENDENT CLAIMS FEE	3	-	3	***	0	LG=\$200 SM=\$100	\$ 0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS						LARGE ENTITY FEE = \$380 SMALL ENTITY FEE = \$180	\$ 0
ADDITIONAL SIZE FEE (IF ANY) (TOTAL PAGES OF SPEC AND DRAWINGS TOGETHER)						\$250 FOR EACH ADDITIONAL 50 SHEETS	\$ 0
TOTAL							\$ 0

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

- ☐ A check in the amount of \$ 0 to cover the additional claims fee is enclosed. **A copy of this sheet is enclosed.**
- ☐ A check in the amount of \$ 0 to cover the extension fee is enclosed. **A copy of this sheet is enclosed.**
- ☒ The Commissioner is hereby authorized to charge any deficiencies of fees associated with this communication or credit any overpayment to Deposit Account No. 50-1314. **A copy of this sheet is enclosed.**
- ☒ Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims
- ☒ Any patent application processing fees under 37 C.F.R. § 1.17

Respectfully submitted,
HOGAN & HARTSON L.L.P.By: 

Y. Jenny Luo, Ph.D.

Registration No. 54,284

Patent Agent for Applicant

Date: August 6, 2007

1999 Avenue of the Stars, Suite 1400
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TOTAL CLAIMS FEE	25	-	34	**	LG=\$50 SM=\$25	\$[FEE] \$ 0
INDEPENDENT CLAIMS FEE	3	-	3	***	LG=\$200 SM=\$100	\$[FEE] \$ 0
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ADDITIONAL SIZE FEE (IF ANY) (TOTAL PAGES OF SPEC AND DRAWINGS TOGETHER)					\$250 FOR EACH ADDITIONAL 50 SHEETS	\$ 0
TOTAL						\$ 0

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